

Draft Recommendations

WA - Medical Interpreter Testing & Certification

Six Criteria Guided My Assessment and Recommendations

WASHINGTON STATE OPTIONS FOR MEDICAL INTERPRETER PATHWAYS TO CERTIFICATION

	WA State DSHS-LTC	WA State Community Colleges	National Certification via CCHI or NBCMI
CRITERIA [1 pt for each YES]	1-OBTAINS FUNDING 2-Conducts Job Task Analysis so as to 3-Redesign Test 4-Resumes Testing	Official training and testing centers for DSHS-LTC	Reciprocity with National Certification credentials, accepted by DSHS-LTC
Current Process Exists	NO Not testing	NO	YES
Current Process is Accredited	NO Even when DSHS-LTC was actively testing, their tests were not accredited and remained unchanged since implementation	N/A test comes from DSHS test comes from CCHI test comes from NBCMI	YES
Current Process is Reliable	NO Not testing	NO Last minute cancellations of training courses (due to insufficient enrollment) this happens regularly	YES
Current Process is Accessible	NO Not currently testing	YES Classes online Proctored testing available	YES Testing online
Current Process is Vendor-neutral	NOT currently testing However, handing off testing to Universal Language Services (a language agency that provides interpreters for Public Health in WA state), appears to be a direct conflict of interest. This partnership was suspended after 4 months...	YES	YES
Current Process is Sustainable	NO Test is outdated and needs to be revamped	MAYBE YES Requires collaboration between DSHS and all WA state community colleges	YES
	0	3	6

I am proposing an interim solution. Washington State to accept and approve reciprocity with both national certifying bodies for healthcare interpreting, CCHI and NBCMI, until it approves a budget for test redesign and implementation at the state level.

In a perfect world, we would already have budget approval for the job task analysis and test design, that would allow for pilot testing and training of raters (to grade/score recordings of interpreter certification candidates' oral renderings of test questions). But we live in the real world. Reality tells us that the three-year backlog of interpreters waiting to be tested needs to be resolved as quickly as possible for the benefit of the community and Public Health. **The interim solution would address pent up demand from the last three years immediately.**

Washington State legislators

If you want DSHS-LTC to return to being able to test potential medical interpreters, you need to approve funds that are sufficient to restructure the entire certification process, including the creation of new written and oral test questions and scenarios. This takes money and it takes time. A conservative timeline would be 18 to 30 months.

For this reason, it would behoove DSHS-LTC to vet credentials of those interested individuals who wish to take the medical interpreter test and maintain the list on their database. CCHI, via Natalya Mytareva, has already offered a price reduction for the exam fees if DSHS would maintain the database of interpreters and vet potential candidates for the pre-requisites needed to sit for the national certification exam.

If at some point, WA state approves 1.5 million dollars to restructure and reinstate DSHS-LTC testing (100K for the initial job task analysis, 100K for written test development, 100K for each language-specific exam), they would eventually be able to test in a dozen languages. The time it would take from initiating a test re-design to implementation for the first cohort of a needed language, say Spanish, is at least two years. Languages of limited diffusion, say Pashto or Dari from Afghanistan, or Rohingya or Chin from Myanmar would be much longer. I stand ready to assist in this effort and would applaud successful rollout of a future medical interpreter state level exam for the state of Washington.

The timeline for developing and offering language-specific tests, in the top ten or twelve languages in highest demand within WA state is literally a decade or more. As far as I know, DSHS-LTC is down to two FTE employees, so an additional, significant, investment in hiring staff, over and above taking the steps to invest and create a new test, **WILL NEED BUDGETS FUNDED** for this to become a reality!

Both national certifying bodies for healthcare interpreters are up and running at the present time. We could clear up the backlog of interpreters waiting to test, or who are partway through their testing process (e.g., have taken the written test and are waiting to take the oral exam).

If we truly want to address the problem, we need a solution we can implement immediately. This is my recommendation.

Submitted respectfully,

Eliana Lobo

InterpreterTrainer@outlook.com

elobo@highline.edu